PHA	5-	Year	and
Annı	เลโ	Plan	

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB No. 2577-0226 Expires 4/30/2011

1.0	PHA Information			DILL C	1 11.050					
	PHA Name: _Housing Authority of Galla PHA Type: Small H	igh Performing		HCV (Section 8)	ode: <u>IL060</u>					
	PHA Type: Siliali III H. PHA Fiscal Year Beginning: (MM/YYY)			☐ HC v (Section 8)						
	Timeriscar rear Beginning. (WHV) 111	1). <u>04/2010</u>								
2.0	Inventory (based on ACC units at time o	f FY beginning	in 1.0 above)							
	Number of PH units: 97 Number of HCV units: 0									
3.0	Submission Type		D. 0.1	ler ni oi						
	S-Year and Annual Plan ☐ Annual Plan Only ☐ 5-Year Plan Only									
4.0	DYX C	I DVI L C	(01 11 16 1 141		1)					
	PHA Consortia] PHA Consorti	a: (Check box if submitting a join	int Plan and complete table b	elow.)					
		DITA	D ()I 1 1 1 1 1	D N d	No. of Unit	ts in Each				
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	Program	-				
		Code	Consortia	Collsorua	PH	HCV				
	PHA 1:									
	PHA 2:									
5.0	PHA 3:	1 . 5 37	DI 1.							
5.0	5-Year Plan. Complete items 5.1 and 5.2	only at 5-Year	Plan update.							
5.1	Mission. State the PHA's Mission for se	ring the needs	of low income years low income	and autromaly law income	familias in the E	DLI A 'c				
	jurisdiction for the next five years: The laffordable housing for the elderly and independence. The Housing Authority	Mission is to op families, withou	erate the development solely for the discrimination, in a manner	or the purpose of providing that encourages self-suffici	decent, safe, sa ency and econo	nnitary, and omic				
	development.									
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. The Housing Authority of Gallatin County will continue to improve the quality of assisted housing through renovation and modernization of the 97 public housing apartments. The Housing Authority will continue to encourage residents to become self-sufficient and economically independent through providing incentives for residents to become gainfully employed without rent penalty. Rent increases will be delayed and flat rents will be maintained at a level to encourage residents to seek job opportunities. Strive for energy efficiency:									
	Replacement of obsolete systems and e									
	Prior 5-Year Plan Goals and Objective	s – Report on F	Progress: (See item 10.0(a)).							
	PHA Plan Update									
	(a) Identify all PHA Plan elemen	ts that have been	n revised by the PHA since its la	ast Annual Plan submission:						
	PHA Plan Elements:									
	1. Eligibility, Selection and		olicy – No Change							
	2. Financial Resources – N									
	3. Rent Determinations – No. 4. Operation and Manager		ngo							
	5. Grievance Procedure –		ilge							
	6. Designated Housing – N									
6.0	7. Community Service and									
	8. Safety and Crime Preve	ntion – No Cha	inge							
	9. Pets – No Change 10. Civil Rights Certificatio	n No Changa								
	11. Fiscal Year Audit – No									
	12. Asset Management – No									
	13. Violence Against Wome		nce – See Attachment A							
	Procurement Policy – See A Carbon Monoxide Detector									
	(b) Identify the specific location(s) when elements, see Section 6.0 of the instru 62984. 618-269-3080 Office 618-269	ctions. Housin	g Authority of Gallatin Count							
7.0	Hope VI, Mixed Finance Modernizatio Programs, and Project-based Vouchers				Housing, Home	ownership				
8.0	Capital Improvements. Please complete	e Parts 8.1 throu	gh 8.3, as applicable.							

Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually 8.1 complete and submit the Capital Fund Program Annual Statement/Performance and Evaluation Report, form HUD-50075.1, for each current and open CFP grant and CFFP financing. Grant No. IL06P06050107 - See Attachment C; Grant No. IL06S06050108 - See Attachment D. Grant No. IL06P06050109 - See Attachment E; Grant No. IL06P06050110 - See Attachment F Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the Capital Fund 8.2 Program Five-Year Action Plan, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. See Attachment G. Capital Fund Financing Program (CFFP). 8.3 Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and 9.0 other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. The waiting list consists of 16 families. Of this total, 7 are extremely low income and 6 are very low income, and 3 are low income. Families without children account for 4 applications, families with children total 12. 2 Elderly families are on the waiting list. Characteristics by Bedroom Size are 4 applicants for 1Br, 7 applicants for 2Br, and 5 applicants for 3 Br. No applicants are on file for the 4 Br. The Race/ethnicity characteristics for the applications are 100% of total families as White/Non-Hispanic. The annual turnover rate is 15 apartments. The waiting list is open and the PHA has no plans to close the list at this time. Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. 9.1 The Housing Authority will utilize capital fund resources to maintain the entire existing Public Housing inventory, ensuring its viability to provide affordable housing to those residents on the waiting list. The Authority plans to replace all existing housing roofing with new roofing that should extend the roofing life expectancy for another 25 years or more and to replace all damaged concrete sidewalks and driveways if funds allow. The Authority has no plans to demolish or remove from inventory any Public Housing units. Additional Information. Describe the following, as well as any additional information HUD has requested. (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5- Year Plan. Prior 5-Year Plan Goals and Objectives - Report on Progress Goal: Expand the supply of assisted housing by reducing public housing vacancies through participation in the Continuum of Care Program Throughout the program and subsequent to its termination, the Housing Authority has been able to maintain 95 – 99% occupancy. Goal: Improve the quality of assisted housing by renovating or modernizing public housing units. Progress: The Housing Authority has utilized CFP funds and ARRA funds to make needed improvements and modernize the property. Goal: Encourage residents to become self-sufficient and economically independent by providing incentives for tenants to become gainfully employed without rent penalty. To delay rent increases and to keep flat rents at a level to encourage tenants to seek job opportunities. Progress: Currently 70% of family households have a primary income of wages. (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and 10.0 "substantial deviation/modification" Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the housing authority that fundamentally changes the mission, goals, objectives, or plans of the agency and which require formal approval of the Board of Commissioners. A change to rent or admission policies, additions of non-emergency items other than transfers to operations, not included in the current Annual Statement or 5-Year Plan, and change with regard to demolition, or disposition, designation, homeownership programs or conversion activities shall be considered a significant amendment to modification. An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements; such changes will not be considered significant amendments. The HAGC reserves the right to full fungibility in the accomplishment of its goals and objectives in the capital improvement plan. Funds from one year's plan may be utilized to accomplish any work items scheduled during the five-year plan and shall not be considered a substantial deviation. Emergency work items shall take precedence over scheduled work items and shall not be considered a substantial deviation. Any excess funds remaining after completion of the scheduled work items for the annual plan year may be utilized for future year's planned work items or transferred into the operations account. Capital Funds originally designated for Operations may be utilized to supplement any other approved work item in order to accomplish the goals in the Plan. This shall not be considered a substantial deviation. Capital Funds may be transferred into Operations at any time to prevent the HAGC from being designated as financially troubled. This shall not be considered a substantial deviation.

- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
 - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.

 Resident Advisory Board Comments See Attachment H
 - (g) Challenged Elements No elements were challenged.
 - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
 - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

Part I: Summary							
A Name: Capital Fund Program Grant No: IL06S060501-09 Replacement Housing Factor Grant No: PFPY of Grant Approval: PFPY of G							
	n Report	Revised Annual Statement (revisi Final Performance and Evaluatio		Disasters/Emei	Grant nal Annual Statement —Reserve for rmance and Evaluation Report for Period Ending:	O to eqyT ☐Origin ☐OTigin	
	utoa letoT	mated Cost			Summary by Development Account	Line	
Expended	bətsgildO	Revised 2	IsnigirO				
					Total non-CFP Funds	I	
					1406 Operations (may not exceed 20% of line 21) 3	7	
00.0	008,71		008 21	(1	1408 Management Improvements	1	
			008,71	(1	1410 Administration (may not exceed 10% of line 2	 	
					1111 Audit	9	
					1415 Liquidated Damages 1430 Fees and Costs	9	
				1440 Site Acquisition		8	
00 0	000			1450 Site Improvement		6	
00.0	00.0		161,191		1460 Dwelling Structures	01	
					1465.1 Dwelling Equipment—Nonexpendable	11	
					1470 Non-dwelling Structures	12	
					1475 Non-dwelling Equipment	εI	
					1485 Demolition	71	
					1492 Moving to Work Demonstration 1495.1 Relocation Costs	SI	
					1499 Development Activities	21 91	
				VHe	1501 Collateralization or Debt Service paid by the I	18a	
					9000 Collateralization or Debt Service paid Via Sys	18ba	
					Payment	i	
00.0	008,71		600 027		1502 Contingency (may not exceed 8% of line 20)	61	
			266,871		Amount of Annual Grant: (sum of lines 2 – 19)	07	
					Amount of line 20 Related to LBP Activities	17	
				S	Amount of line 20 Related to Section 504 Activities	77	
					Amount of line 20 Related to Security – Soft Costs Amount of line 20 Related to Security – Hard Costs	23	
1					Amount of line 20 Related to Energy Conservation	\$3 \$3	

To be completed for the Performance and Evaluation Report.

 $^{^2}$ To be completed for the Performance and Evaluation Report or a Revised Annual Statement 3 PHAs with under 250 units in management may use 100% of CFP Grants for operations

⁴ RHF funds shall be included here.

Part I: Summary									
PHA Name: Housing Authority Gallatin County IL060	Grant Type a Capital Fund Date of CFFI	1-09 Replacement Housing Factor	Grant No:	FY of Grant: 009 FY of Grant Approval: 009					
Type of Grant Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:) Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report									
Line Summary by Development Account		Total Estimated Cost		Total .	Actual Cost ¹				
		Original	Revised ²	Obligated	Expended				
Signature of Executive Director William E. Sanders	lande	Date 01/15/2010	Signature of Public Housing	Director	Date				

Part II: Supporting	Pages								
PHA Name:		Grant Type and Capital Fund Pro Replacement Ho	Frant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description Categor	of Major Work	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost Statu		Status of Work
					Original	Revised ¹	Funds Obligated	Funds Expended ²	
		-							
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.

Housing Authority Gallatin County   Capital Fund Pr		Grant Type and Capital Fund Pro Replacement Ho	Number ogram Grant No: IL06S060501-09 CFFP (Yes/ No): using Factor Grant No:				Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description Categor	of Major Work	Development Account No.	Quantity Total Estimate		nated Cost	Total Actual Cost		Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Administ		1410	11	17,800		17,800	0.00	Pending
PHA-Wide	Dwelling St Roofing & Cond		1460				0.00	0.00	Bidding Proces
					161,192				
						1			

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.

PHA Name: ousing Authority Gallati	n County				Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund O (Quarter End		All Funds (Quarter Er	nding Date)	Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA-Wide	03/17/2010	03/02/2010	03/17/2011		Bids to be awarded 03/01/2010
111/11/100					
				*	

Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

# RESOLUTION 2010-01-2 AMEND PROCUREMENT POLICY TO COMPLY WITH REGULATIONS GOVERNING RECOVERY ACT FUNDING

BE IT SO RESOLVED THAT THE COMMISSIONERS of the Housing Authority of Gallatin County is receiving funding from the American Recovery and Reinvestment Act of 2009, that was signed into law by President Obama on February 17th, 2009 and

Whereas, HUD published PIH Notice 2009-12 stating that a PHA shall amend its procurement policy to facilitate obligation and expenditure of Recovery Act funds: and

Whereas, the Housing Authority of Gallatin County must comply with HUD requirements,

NOW THEREFOR, be it resolved that the Housing Authority of Gallatin County amends its Procurement Policy when dealing solely with Recovery Act funding to authorize the Contracting Officer to refrain from compliance with state and local procurement requirements as expressed in the Procurement Policy except where permitted by 24 CFR 85.

The sentence that reads "In the event an applicable law or regulation is modified or eliminated, or a new law or regulation is adopted, the revised law or regulation shall, to the extent inconsistent with these Policies, automatically supersede these Policies" contained in the Changes in Laws and Regulations Section under General Provisions is suspended solely for procurements made with the Recovery Act funding.

This resolution shall become effective immediately and shall become an addendum to the Procurement Policy dated September 7, 2009, as amended by Resolution No. 2009-9-1 and Resolution No. 2009-3-1.

Dated this 4 th day of January 4, 2010.	
Bernice Lawler, Chairman	
Definee Lawier, Chan man	William E. G. T. G.
	William E. Sanders, Secretary

### RESOLUTION 2010-01-1 AMEND PROCUREMENT POLICY TO INCLUDE BUY AMERICAN REQUIREMENTS OF SECTION 1605 OF THE RECOVERY ACT

BE IT SO RESOLVED THAT THE COMMISSIONERS of the Housing Authority of Gallatin County is receiving funding from the American Recovery and Reinvestment Act of 2009, that was signed into law by President Obama on February 17th, 2009 and

Whereas, HUD published PIH Notice 2009-12 stating that a PHA shall amend its procurement policy to follow the Buy American requirements of Section 1605 of the Recovery Act and use only Iron, steel, and manufactured goods produced in the United States of America in their projects:

Whereas, the Housing Authority of Gallatin County must comply with HUD requirements,

NOW THEREFOR, be it resolved that the Housing Authority of Gallatin County amends its Procurement Policy when dealing solely with Recovery Act funding to include the Buy American requirements of Section 1605 of the Recovery Act.

This resolution shall become effective immediately and shall become an addendum to the Procurement Policy dated September 7, 2009, as amended by Resolution No. 2009-9-1 and Resolution No. 2009-3-1.

Dated this 4 th day of January 4, 2010.	
Bernice Lawler, Chairman	
	William E. Sanders, Secretary

# SPECIAL MEETING OF THE RESIDENT ADVISORY COUNCIL OF THE GALLATIN COUNTY HOSUING AUTHORITY

<b>T</b>	1	$\alpha$	200	$\mathbf{n}$
Dece	mber	2.3	-20 N	14

Chairperson Alice Barlow called the meeting to order at 1:00 P.M.

The following members were present:

Thelma Miles Steve Raymer Jim Ditterline Phillip Tucker

Also present was William Sanders Executive Director of the Housing Authority.

The Special Meeting was called to discuss the Agency Five Year and Annual Plan for the Housing Authority.

The Executive Director briefly outlined some of the law changes which will impact all of the tenants in the housing developments. After a discussion, the Council went through the Comprehensive Agency Five Year and One Year Plans for the Housing Authority of Gallatin County. The Five Year and One Year Plan was examined and discussed by the Council. There were no suggested changes to the either Plan by the Council.

A motion was made by Jim Ditterline and second by Thelma Miles to approve the Five Year and One Year Plans as presented. Voting: Aye: All. Nay: None. Motion carried.

With no other business to come before the Tenant Council a motion was made by Jimmy Ditterline and seconded Phillip Tucker to adjourn. Voting: Aye: All. Nay: None. Motion carried.

Chairman		

Part	I: Summary		0				
PHA	Name/Number Gallatin Cou	nty IL060	Locality (City/County & State	)Shawneetown, IL 62984	☐Original 5-Year Plan  ☐Revision No:		
<b>A</b> .	Development Number and Name	Work Statement for Year 1 FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014	
В.	Physical Improvements Subtotal	Annual Statement	:			,	
C.	Management Improvements					v.	
D.	PHA-Wide Non-dwelling Structures and Equipment						
E.	Administration		1.9				
F.	Other						
G.	Operations		141,000	141,000	141,000	141,000	
H.	Demolition						
I.	Development						
J.	Capital Fund Financing – Debt Service						
K.	Total CFP Funds						
L.	Total Non-CFP Funds						
M.	Grand Total		141,000	141,000	141,000	141,000	

Par	t I: Summary (Continua	ation)						
PHA	Name/Number Gallatin Cou	unty IL060	Locality (City/county & State	Shawneetown, IL 62984	Original 5-Year P	☐ Original 5-Year Plan  ☐ Revision No:		
	Development Number and Name  Work Statement for Year 1 FFY 2010		Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014		
		Annual Statement				~		
	IL060		Operations	Operations	Operations	Operations		
	PHA-Wide		141,000	141,000	141,000	141,000		

Part II: Supp	orting Pages – Physical Needs Wor	k Statement	t(s)				
Work Statement for	Work Statement for Year FFY 2011	2011		Work Statement for Year: 2012 FFY 2012			
Year 1 FFY 2010	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	
See Annual	Operations	90%	127,000	Operations	90%	127,000	
Statement							
	Subtotal of Estimate	d Cost	\$	Subtotal of Estin	nated Cost	\$	
	Subtotal of Estimate		ຶ 127,000	Subtotal of Estimated Cost 127,000			

Part II: Sup	porting Pages – Physical Needs Work St	tatement(s	)				
Work Statement for	Work Statement for Year 2013 FFY 2013			Work Statement for Year: 2014 FFY 2014			
Year 1 FFY 2010	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	
See Annual	Operations	90%	127,000	Operations	90%	127,000	
Statement	- Sportalistic		.21,000	7,000 Operations			
		***************************************			-		
					-		
	Subtotal of Estimated Co	ost	\$ 127,000	Subtotal of Estimated Cost \$ 12		\$ 127,000	

Part III: Supp	orting Pages - Management Needs Work Stat	tement(s)		Manager Committee Committe	
Work Statement for	Work Statement for Year 2011 FFY 2011		Work Statement for Year: 2012 FFY 2012		
Year 1 FFY 2010	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	
See					
Annual	Operations	14,000	Operations	14,000	
Statement					
	Subtotal of Estimated Cost	\$ 14,000	Subtotal of Estimated Cost	\$ 14,000	

Part III: Supp	porting Pages - Management Needs Work St	atement(s)			
Work Statement for	Work Statement for Year 2013 FFY 2013		Work Statement for Year: 2014 FFY 2014		
Year 1 FFY 2010	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost	
See					
Annual	Operations	14,000	Operations	14,000	
Statement					
	Subtotal of Estimated Cost	\$ 14,000	Subtotal of Estimated Cost	\$ 14,000	

DIT										
Part I: Summary										
PHA Na		ant Type and Number			FFY	of Grant;				
	Ca	pital Fund Program Gra	nt No: IL06P060501	)						
Gallatir	County IL060		of Grant Approval:							
	1				2010	)				
	Type of Grant									
	Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: )									
	rmance and Evaluation Report for Period Ending:			Final Performance and Evaluation						
Line	Summary by Development Account			imated Cost	Total Act					
			Original	Revised ²	Obligated	Expended				
1	Total non-CFP Funds									
2	1406 Operations (may not exceed 20% of line 21) ³	141,000			0.00	0.00				
3	1408 Management Improvements									
4	1410 Administration (may not exceed 10% of line 21)									
5	1411 Audit				×					
6	1415 Liquidated Damages									
7	1430 Fees and Costs									
8	1440 Site Acquisition									
9	1450 Site Improvement									
10	1460 Dwelling Structures									
11	1465.1 Dwelling Equipment—Nonexpendable									
12	1470 Non-dwelling Structures									
13	1475 Non-dwelling Equipment									
14	1485 Demolition									
15	1492 Moving to Work Demonstration									
16	1495.1 Relocation Costs									
17	1499 Development Activities 4									
18a	1501 Collateralization or Debt Service paid by the PHA									
18ba	9000 Collateralization or Debt Service paid Via System o	f Direct								
	Payment									
19	1502 Contingency (may not exceed 8% of line 20)									
20	Amount of Annual Grant: (sum of lines 2 – 19)	141,000			0.00	0.00				
21	Amount of line 20 Related to LBP Activities									
22	Amount of line 20 Related to Section 504 Activities									
23	Amount of line 20 Related to Security – Soft Costs									
24	Amount of line 20 Related to Security - Hard Costs									
25	Amount of line 20 Related to Energy Conservation Measu	ires								

 ¹ To be completed for the Performance and Evaluation Report.
 ² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
 ³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I:	Part I: Summary									
PHA Name:  Gallatin County IL060  Grant Type and Number Capital Fund Program Grant No: IL06P06050110 Date of CFFP:  Date of CFFP:  Capital Fund Program Grant No: IL06P06050110 Date of CFFP:  Replacement Housing Factor Grant No:  FFY of Grant: 2010  FFY of Grant Approval: 2010										
Origin	Type of Grant  ☑ Original Annual Statement									
Line	Summary by Development Account		Total Est	imated Cost	Total Ac	tual Cost 1				
			Original	Revised ²	Obligated	Expended				
Signatu William	Signature of Executive Director William E. Sanders  Signature of Public Housing Director Date  Date									

Part II: Supporting I	Pages								
PHA Name:  Gallatin County IL060  Grant Type and Capital Fund Pro Replacement Ho		Number ogram Grant No: ousing Factor Grant	gram Grant No: IL06P06050110 CFFP (Yes/No): NO				Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	ty Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²		
PHA-Wide	Operations	1406		141,000		0.00	0.00		
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.

Part I:	Summary						
PHA Na Housin IL060	g Authority Gallatin County	rant Type and Number apital Fund Program Grant ate of CFFP:	No: IL06P060501	09 Replacement Housing Factor	or Grant No: 20	FFY of Grant: 2009 FFY of Grant Approval: 2009	
Perfo	nal Annual Statement Reserve for Disc rmance and Evaluation Report for Period Ending:	sters/Emergencies		Revised Annual Statement (revisi Final Performance and Evaluatio	n Report		
Line	Summary by Development Account		Total Est	imated Cost	Total A	ctual Cost 1	
		Ori	ginal	Revised ²	Obligated	Expended	
1	Total non-CFP Funds						
2	1406 Operations (may not exceed 20% of line 21) ³	140,667			0	0	
3	1408 Management Improvements						
4	1410 Administration (may not exceed 10% of line 21)						
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs						
8	1440 Site Acquisition						
9	1450 Site Improvement						
10	1460 Dwelling Structures						
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures						
13	1475 Non-dwelling Equipment						
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities 4						
18a	1501 Collateralization or Debt Service paid by the PHA						
18ba	9000 Collateralization or Debt Service paid Via System of Payment	of Direct					
19	1502 Contingency (may not exceed 8% of line 20)						
20	Amount of Annual Grant: (sum of lines 2 – 19)	140,667	-				
21	Amount of line 20 Related to LBP Activities						
22	Amount of line 20 Related to Section 504 Activities						
23	Amount of line 20 Related to Security – Soft Costs						
24	Amount of line 20 Related to Security – Hard Costs						
25	Amount of line 20 Related to Energy Conservation Meas	ures					

 ¹ To be completed for the Performance and Evaluation Report.
 ² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
 ³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: Summary									
PHA Name: Housing Authority Gallatin County IL060  Grant Type and Number Capital Fund Program Grant No: IL06P06050109 Date of CFFP: Replacement Housing Factor Grant No: PFY of Grant Approval: 2009 FFY of Grant Approval: 2009									
Type of Grant  Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: )  Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report									
Line Summary by Development Account	Total	Estimated Cost	Total Act	ual Cost 1					
	Original	Revised ²	Obligated	Expended					
Signature of Executive Director  William E. Sanders  Date  1-15-2010  Signature of Public Housing Director  Date									

Part II: Supporting I		Creant Type and	Number	***************************************			Federal FFV of	Crant	
PHA Name: Housing Authority 0 L060	Gallatin County	Grant Type and Capital Fund Pro Replacement Hou	gram Grant No:   using Factor Grant	L06P06050 No:	109 CFFP (Y	(es/ No): NO	Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories			Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	× *
PHA-Wide	Operation	ons	1406		140,667		0	0	0%
	-								
e comment of the comm									

 $^{^1}$  To be completed for the Performance and Evaluation Report or a Revised Annual Statement.  2  To be completed for the Performance and Evaluation Report.

Part I: Summary									
PHA Na		nt Type and Number			FFY of Grant:				
Housin			Program Grant No: IL06P06050108 Replacement Housing Factor Grant No: 2008						
IL060	Date	e of CFFP:				FFY of Grant Approval:			
	2000								
Type of		(17)							
	inal Annual Statement Reserve for Disast	ers/Emergencies		Revised Annual Statement (revisi					
Line	rmance and Evaluation Report for Period Ending: Summary by Development Account		Total Estin	Final Performance and Evaluatio		Actual Cost 1			
Line	Summary by Development Account	0-1	rinal LStin	Revised ²		Expended Expended			
1	Total non-CFP Funds	Uris	ginai	Revised	Obligated	Expended			
2	1406 Operations (may not exceed 20% of line 21) ³	141,406			0				
3	1408 Management Improvements	141,400			0				
4	1410 Administration (may not exceed 10% of line 21)				A CONTRACTOR OF THE PROPERTY O				
5	1411 Audit								
6	1415 Liquidated Damages								
7	1430 Fees and Costs								
8	1440 Site Acquisition								
9	1450 Site Improvement								
10	1460 Dwelling Structures								
11	1465.1 Dwelling Equipment—Nonexpendable								
12	1470 Non-dwelling Structures								
13	1475 Non-dwelling Equipment								
14	1485 Demolition								
15	1492 Moving to Work Demonstration								
16	1495.1 Relocation Costs								
17	1499 Development Activities ⁴								
18a	1501 Collateralization or Debt Service paid by the PHA				The second secon				
18ba	9000 Collateralization or Debt Service paid Via System of I	Direct							
	Payment		1	4					
19	1502 Contingency (may not exceed 8% of line 20)								
20	Amount of Annual Grant: (sum of lines 2 – 19)	141,406							
21	Amount of line 20 Related to LBP Activities								
22	Amount of line 20 Related to Section 504 Activities								
23	Amount of line 20 Related to Security – Soft Costs								
24	Amount of line 20 Related to Security - Hard Costs								
25	Amount of line 20 Related to Energy Conservation Measure	es							

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PhAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: Summary								
PHA Name: Housing Authority Gallatin County IL060	Grant Type and Number Capital Fund Program Grant No: IL06P0605 Date of CFFP:	50108 Replacement Housing Factor	Grant No: 2008	of Grant Approval:				
Type of Grant  Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no: )  Performance and Evaluation Report for Period Ending: Final Performance and Evaluation Report								
Line Summary by Development Account	Total 1	Estimated Cost	Total Actu	ıal Cost 1				
	Original	Revised ²	Obligated	Expended				
Signature of Executive Director William E. Sanders William E.	Date 1-45-2010	Signature of Public Housing	Date					

Part II: Supporting I									
PHA Name: lousing Authority 0 L060	Number gram Grant No:   using Factor Grant	L06P06050 No:	108 CFFP (Y	Federal FFY of Grant: 2008					
Development Number Name/PHA-Wide Activities	General Description Categor	of Major Work			Total Estimated Cost		Total Actual Cost		Status of Work
	,				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Operation	ons	1406		141,406		0	0	0%
		<u> </u>							

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.

	Name:	rant Type and Num						
ous	ong Authority Gallatin County	apital Fund Program	Fund Program Grant No. II 06P06050107					
.060	) D	Date of CFFP:		Factor Grant No:	2007			
	of Grant					FFY of Grant Approval:		
]Or	iginal Annual Statement Reserve for Disc	asters/Emergencies	normal and a second sec			2007		
Pe	rformance and Evaluation Report for Period Ending:	asters/Emergencies	<b>⊠</b> 1	Revised Annual Statement (1	revision no:2			
ine	Summary by Development Account			final Performance and Eval	uation Report			
			Total Estir		Total Actual Cost 1			
	Total non-CFP Funds		Original	Revised 2	Obligated			
	1406 Operations (may not exceed 20% of line 21) ³	144,433			- Jonguitu	Expended		
	1408 Management Improvements	144,433			144.433	144,433		
	1410 Administration (may not exceed 10% of line 21)					114,400		
	1411 Audit							
	1415 Liquidated Damages							
	1430 Fees and Costs							
	1440 Site Acquisition							
	1450 Site Improvement							
)	1460 Dwelling Structures	·						
1	1465.1 Dwelling Equipment—Noneypendable							
2	14/0 Non-dwelling Structures							
3	1475 Non-dwelling Equipment							
	1485 Demolition							
	1492 Moving to Work Demonstration							
	1495.1 Relocation Costs							
	1499 Development Activities 4							
a	1501 Collateralization or Debt Service paid by the PHA							
oa	9000 Collateralization or Debt Service naid Via System of	Direct						
	1 ayıncın	Direct						
	1502 Contingency (may not exceed 8% of line 20)					1		
	Amount of Annual Grant: (sum of lines 2 – 10)	144,433						
	Amount of line 20 Related to LBP Activities	1777,700			144,433	144,433		
	Amount of line 20 Related to Section 504 Activities					,		
	Amount of line 20 Related to Security - Soft Costs							
	Amount of line 20 Related to Security - Hard Costs							
	Amount of line 20 Related to Energy Conservation Measure	es						

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: Summary			
PHA Name: Housing Authority Gallatin County IL060  Type of Grant		placement Housing Factor Grant No:	FFY of Grant: 2007 FFY of Grant Approval: 2007
☐ Original Annual Statement ☐ Reserve for I☐ Performance and Evaluation Report for Period Ending:  Line Summary by Development Account	isasters/Emergencies	nnual Statement (revision no:2 ) ormance and Evaluation Report	
Signature of Executive Director William E. Sanders William & Lane	Original Simulation	Revised ² Obligated e of Public Housing Director	otal Actual Cost 1 Expended Date

Part II: Supporting									
PHA Name: Housing Authority Gallatin County IL060  Grant Type and Capital Fund Pro Replacement Ho			Number ogram Grant No: IL06P06050107 CFFP (Yes/ No): using Factor Grant No:				Federal FFY of Grant: 2007		
Development Number Name/PHA-Wide Activities	General Description Categor	of Major Work Development		Total Estimated Cost		Total Actual Cost		Status of Worl	
					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA-Wide	Operation	ons	1406		144,433		144,433	144,433	100%
	<del></del>								
								4	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

# **Compliance with Carbon Monoxide Detector Act**

The Housing Authority of Gallatin County has purchased Carbon Monoxide detectors for all dwelling units that use fossil fuels as a source of heat.

One Carbon Monoxide detector has been installed within 15 feet of every room used for sleeping purposes. These detectors were installed prior to January 1, 2007.

The alarm is a combined unit with smoke detecting devices and the unit complies with respective standards and the alarm differentiates the hazard.

Each resident is provided written information regarding alarm maintenance including the penalties for willfully tampering with the operation of the detector.

## **Violence Against Women Act Report**

The HAGC provides or offers the following activities, services, or programs, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking.

The HAGC has entered into an Agreement with the Gallatin County State's Attorney's Victim's Advocate Program. This Agreement provides for a network of services which mutually lead to the betterment of our clients. As follows:

- 1. Recognize the existence of their respective professional services.
- 2. Maintain regular and frequent contact regarding changes in service elements present within each.
- 3. Assist in providing necessary client information with the use of appropriate release of information forms.
- 4. Acquaint and refer individuals who may have need of the other's services.
- 5. Generally promote the continuation of a cooperating coordination of services now available to victims of crime.
- 6. Neither agency will be required to accept a referral for inappropriate services.

The HAGC provides or offers the following activities, services, or programs that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing.

For current residents, the HAGC will provide the Mandatory Notification material which makes them aware of the requirements of VAWA. At the time of initial lease-up, the resident will be provided Mandatory Notification material which outlines VAWA and the resident's rights. After proper notification, the dwelling lease will be modified to include the VAWA requirements.

The HAGC provides or offers the following activities, services, or programs to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

The HAGC will issue a HUD approved certification form for victims of abuse to use to certify that the alleged incidents of abuse are bona fide or in certain instances accept certifications from service providers. The HAGC will work closely with the Gallatin County Victim's Advocate, State's Attorney, and local police departments to effectively bar perpetrators of said activities from HAGC property.

Il060v2a10 Attachment A

#### **IL060 ATTACHMENT L**

### HUD 50075 - Additional Plan Information

- Section 11(f) No comments were received from the RAB or any tenants, commissioners or the community.
- Section 11(g) No elements were challenged.
- Section 6 (7) Community Service and Self Sufficiency. The Authority does not administer any related programs.
  - (8) Safety and Crime Prevention. There are no recurring problems that HAGC is aware of.
    HAGC works closely with the Gallatin County and Municipal Police Departments. HAGC reports any suspicions it has and the Police/Sheriff contact the Director as needed.
  - (11) Fiscal Year Audit. A copy of the audit can be reviewed by coming to the HAGC office at 117 W. Wilson Ave. Shawneetown, IL 62984.
  - (13) Violence Against Women Act. See Attachment A.
    - 1. HAGC does not have any programs for victims but has contact information for other agencies that the Authority has been in contact with in the past.
    - 2. Reminder that HAGC does have an admissions preference for those who are victims of domestic violence.

### Section 7 PHA Plan Elements

- (a) HAGC does not have any Hope VI or Mixed Finance Modernization or Development.
- (b & c) HAGC has no plans to demolish, dispose or convert any units.
- (d) Homeownership. The Authority has no homeownership programs.
- (e) HAGC has no Voucher Programs.

ADDITIONS: Carbon Monoxide Detectors/Smoke Detectors were purchased and are installed in all units with gas appliances.